

IN THE UNITED STATES DISTRICT COURT
FOR THE CENTRAL DISTRICT OF CALIFORNIA
EASTERN DIVISION

CASE NUMBER

CV17-3040-ODW (FFMX)

WALTER LEE WILLIAMS,
Plaintiff,

VS.

UNITED STATES OF AMERICA,
et al.,
Defendants.

VERIFIED COMPLAINT
VOLUME 1
EXHIBIT 1 - EXHIBIT 14

WALTER LEE WILLIAMS
Inmate No. - 65562-112
FCI - Englewood
9595 West Quincy Avenue
Littleton, Colorado 80123
303-763-4300
PRO SE REPRESENTATION

EXHIBIT 1

Title 18, United States Code,
Section 249

§ 249. Hate crime acts

(a) **In general.**

(1) Offenses involving actual or perceived race, color, religion, or national origin. Whoever, whether or not acting under color of law, willfully causes bodily injury to any person or, through the use of fire, a firearm, a dangerous weapon, or an explosive or incendiary device, attempts to cause bodily injury to any person, because of the actual or perceived race, color, religion, or national origin of any person--

(A) shall be imprisoned not more than 10 years, fined in accordance with this title, or both; and

(B) shall be imprisoned for any term of years or for life, fined in accordance with this title, or both, if--

(i) death results from the offense; or

(ii) the offense includes kidnapping or an attempt to kidnap, aggravated sexual abuse or an attempt to commit aggravated sexual abuse, or an attempt to kill.

(2) Offenses involving actual or perceived religion, national origin, gender, sexual orientation, gender identity, or disability.

(A) In general. Whoever, whether or not acting under color of law, in any circumstance described in subparagraph (B) or paragraph (3), willfully causes bodily injury to any person or, through the use of fire, a firearm, a dangerous weapon, or an explosive or incendiary device, attempts to cause bodily injury to any person, because of the actual or perceived religion, national origin, gender, sexual orientation, gender identity, or disability of any person--

(i) shall be imprisoned not more than 10 years, fined in accordance with this title, or both; and

(ii) shall be imprisoned for any term of years or for life, fined in accordance with this title, or both, if--

(I) death results from the offense; or

(II) the offense includes kidnapping or an attempt to kidnap, aggravated sexual abuse or an attempt to commit aggravated sexual abuse, or an attempt to kill.

(B) Circumstances described. For purposes of subparagraph (A), the circumstances described in this subparagraph are that--

(i) the conduct described in subparagraph (A) occurs during the course of, or as the result of, the travel of the defendant or the victim--

(I) across a State line or national border; or

(II) using a channel, facility, or instrumentality of interstate or foreign commerce;

(ii) the defendant uses a channel, facility, or instrumentality of interstate or foreign commerce in connection with the conduct described in subparagraph (A);

- (iii) in connection with the conduct described in subparagraph (A), the defendant employs a firearm, dangerous weapon, explosive or incendiary device, or other weapon that has traveled in interstate or foreign commerce; or
 - (iv) the conduct described in subparagraph (A)--
 - (I) interferes with commercial or other economic activity in which the victim is engaged at the time of the conduct; or
 - (II) otherwise affects interstate or foreign commerce.
- (3) Offenses occurring in the special maritime or territorial jurisdiction of the United States. Whoever, within the special maritime or territorial jurisdiction of the United States, engages in conduct described in paragraph (1) or in paragraph (2)(A) (without regard to whether that conduct occurred in a circumstance described in paragraph (2)(B)) shall be subject to the same penalties as prescribed in those paragraphs.
- (4) Guidelines. All prosecutions conducted by the United States under this section shall be undertaken pursuant to guidelines issued by the Attorney General, or the designee of the Attorney General, to be included in the United States Attorneys' Manual that shall establish neutral and objective criteria for determining whether a crime was committed because of the actual or perceived status of any person.

(b) Certification requirement.

- (1) In general. No prosecution of any offense described in this subsection may be undertaken by the United States, except under the certification in writing of the Attorney General, or a designee, that--
- (A) the State does not have jurisdiction;
 - (B) the State has requested that the Federal Government assume jurisdiction;
 - (C) the verdict or sentence obtained pursuant to State charges left demonstratively unvindicated the Federal interest in eradicating bias-motivated violence; or
 - (D) a prosecution by the United States is in the public interest and necessary to secure substantial justice.
- (2) Rule of construction. Nothing in this subsection shall be construed to limit the authority of Federal officers, or a Federal grand jury, to investigate possible violations of this section.

(c) Definitions. In this section--

- (1) the term "bodily injury" has the meaning given such term in section 1365(h)(4) of this title [18 USCS § 1365(h)(4)], but does not include solely emotional or psychological harm to the victim;
- (2) the term "explosive or incendiary device" has the meaning given such term in section 232 of this title [18 USCS § 232];
- (3) the term "firearm" has the meaning given such term in section 921(a) of this title [18 USCS § 921(a)];

EXHIBIT 2

AFFIDAVIT: "No Reply to Appeal Filed
Central Office in Regards to January
28, 2014, Injury"

WALTER LEE WILLIAMS
Inmate No. - 65562-112
FCI - Englewood
9595 West Quincy Avenue
Littleton, Colorado 80123
PRO SE REPRESENTATION

**AFFIDAVIT: NO REPLY TO APPEAL FILED
WITH THE CENTRAL OFFICE REGARDING
THE JANUARY 28, 2014, INJURY**

My name is **WALTER LEE WILLIAMS**, I am the Plaintiff in this cause of action, and I am an inmate in Federal custody at FCI - Englewood, Littleton, Colorado. I certify that I have personal knowledge of the facts and information averred to herein. Under penalty of perjury, and to the best of my ability, belief, and knowledge, I do hereby depose, aver, and state the following as true and correct:

1. That on December 19, 2014, an Informal Administrative Remedy Request (BP-8) was filed.
2. That on December 29, 2014, a Request For Administrative Remedy (BP-9) was filed.
3. That on January 14, 2015, a Regional Administrative Appeal (BP-10) was filed.
4. That on August 4, 2015, a Central Office Administrative Appeal (BP-11) was filed.
5. That the deadline for Central Office Response to my BP-11 Appeal was on or about September 15, 2015, over thirty (30) days after the submission date of August 4, 2015.
6. That as of the date of this Affidavit being executed, I have not yet

received acknowledgement of, response to, or answer to my BP-11; thus, it is deemed as denied.

7. That this Affidavit is in support of, and attached to , my Verified Complaint.

8. Pursuant to 28 U.S.C. §1746 and 18 U.S.C. §1621, I **WALTER LEE WILLIAMS**, the undersigned Plaintiff in the above referenced action, do hereby aver, under penalty of perjury, that the information contained herein is true and correct to the best of my ability, belief, and knowledge.

FURTHER AFFAINT SAYETH NAUGHT.

EXECUTED ON THIS 11 day of April, 2017, at FCI - Englewood, Littleton, Colorado.

Walter L. Williams

Walter L. Williams
Inmate No. - 65562-112
FCI - Englewood
9595 West Quincy Avenue
Littleton, Colorado 80123
303-763-4300
PRO SE REPRESENTATION

SUBSCRIBED AND SWORN TO BEFORE ME on this 11th day of April, 2017, at FCI - Englewood, Littleton, Colorado.

(SEAL)

Amanda L. Vargas
Notary Public,
State of Colorado

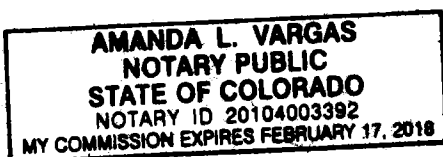


EXHIBIT 3

AFFIDAVIT: "No Reply to Appeal Filed with
Central Office in Regards to FTCA
Administrative Claim No. TRT-WXR-2015-01608"

WALTER LEE WILLIAMS

Inmate No. - 65562-112
FCI - Englewood
9595 West Quincy Avenue
Littleton, Colorado 80123
PRO SE REPRESENTATION

**AFFIDAVIT: NO REPLY TO APPEAL FILED WITH THE
CENTRAL OFFICE REGARDING FTCA ADMINISTRATIVE
CLAIM NO. TRT-WXR-2015-01608**

My name is **WALTER LEE WILLIAMS**, I am the Plaintiff in this cause of action, and I am an inmate in Federal custody at FCI - Englewood, Littleton, Colorado. I certify that I have personal knowledge of the facts and information averred to herein. Under penalty of perjury, and to the best of my ability, belief, and knowledge, I do hereby depose, aver, and state the following as true and correct:

1. That on December 29, 2014, a Claim for Damage Injury, or Death (Standard Form 95 - Tort Claim) was filed.
2. That on January 6, 2015, the Federal Bureau of Prisons acknowledged receipt of my Tort Claim and assigned the claim to the Consolidated Legal Center located at Metropolitan Detention Center, Los Angeles, California.
3. That on June 25, 2015, my Tort Claim was denied by legal staff at the same facility at which I was injured at.
4. That on July 7, 2015, the letter of denial was given to me by my case manager.
5. That on August 6, 2015, a Central Office Administrative Appeal (BP-11) was filed.
6. That the deadline for Central Office response to my BP-11 Appeal was

on or about September 15, 2015, over thirty (30) days after the submission date of August 6, 2015.

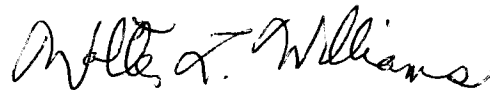
7. That as of the date this Affidavit was executed, I have not yet received acknowledgement of, response to, or answer to my BP-11; thus, it is deemed as denied.

8. That this Affidavit is in support of, and attached to, my Verified Complaint.

9. Pursuant to 28 U.S.C. §1746 and 18 U.S.C. §1621, I, **WALTER LEE WILLIAMS**, the undersigned Plaintiff in the above referenced action, do hereby aver, under penalty of perjury, that the information contained herein is true and correct to the best of my ability, belief, and knowledge.

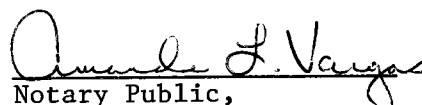
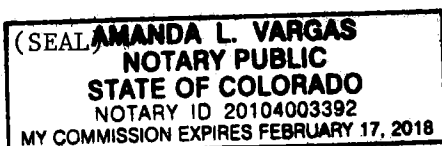
FURTHER AFFAINT SAYETH NAUGHT.

EXECUTED ON THIS 11 day of April, 2017, at
FCI - Englewood, Littleton, Colorado.



Walter L. Williams
Inmate No. - 65562-112
FCI - Englewood
9595 West Quincy Avenue
Littleton, Colorado 80123
303-763-4300
PRO SE REPRESENTATION

SUBSCRIBED AND SWORN TO BEFORE ME on this 11th day of April,
2017, at FCI - Englewood, Littleton, Colorado.



Notary Public,
State of Colorado

*** SEALED DOCUMENT ***

EXHIBIT 4

*** SEALED DOCUMENT ***

BOP Clinical Encounter Establishing Date
Plaintiff was Attacked by Kevir

EXHIBIT 5

Plaintiff's AFFIDAVIT Detailing Events
Leading up to the Brutal Beating
Plaintiff Received

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Fernandez, Manuel; Gits, Christina; Williams, Opal C

SUBJECT: affidavit

DATE: 04/07/2014 06:44:02 AM

This is my affidavit concerning my personal injury. I contend that the Los Angeles Metropolitan Detention Center has acted with gross negligence to me, in not adequately providing for my physical safety and protection from bodily injury, and from psychological trauma as I prepare for my court case. My constitutional right to a fair trial has been compromised because of this poor treatment.

My problems began in October, when a dangerous violent Muslim terrorist was housed in the same residential unit on 8 South. Captain Morales informed me that Omar Kevir made a written death threat against me. Omar did not like me because I am gay, and also because I am Buddhist. I know from my time living in Muslim countries that fundamentalist Muslims are often violent against Buddhists, and also against homosexuals. Captain Morales promised that the MDC staff would protect me. When Omar continued to harass me because of my sexuality and my religion, C.O. Mr. Ford interceded effectively. However, at other times when Mr. Ford was not present, Omar continued to harass and threaten me. I complained repeatedly to C.O. Mr. Young, psychologist Mr. Proctor, and other staff, saying that I feared Omar would cause me physical harm. In response to my complaints, an officer I did not know came into my cell and told me that staff could do nothing as long as Omar did not touch me. Other inmates saw that Omar's verbal attacks on me increased, but officers did nothing. I felt increasingly in danger.

Later in October, as I was talking to another inmate Jose Flores, Omar suddenly attacked me from behind. He hit me on the head and knocked me down. I did not hit him, but as I was lying on the floor I tried to ward off his blows to my head. When I did this, he hit and injured my wrist. I lost consciousness due to his repeated blows on my head. The next thing I knew I was being taken into the medical unit on a stretcher.

I learned later from other inmates who were there, that Omar was sent to SHU for one month, and when he returned to 8 South he bragged that he was glad he "fucked up the faggot." Additionally, I later learned from others that when Omar was beating me, C.O. Young walked very slowly across the unit from his office, and when he got to Omar he calmly asked: "Are you finished?" This slowness to respond, plus his comment, suggests that Mr. Young knew of Omar's planned attack. If this is the case, that was gross negligence on Mr. Young's part.

When I was taken to the medical unit, I was given an X-ray, but not a brain scan. After that, I was put into a cell in SHU and left there without any medical attention. I was not even given an ice pack for my bruised and swollen head and ear, even though both I and psychologist Dr. Shelton repeatedly requested one. While I was still dazed from the attack, I asked C.O. Estrada please not to further hurt my wrist when he placed handcuffs on me. He told me coldly to "shut up," and then he tightened the cuff on my wrist so tightly I yelled in pain. Then he jerked my wrists sharply, until I again cried out in pain. My wrist was hurting for several weeks after that.

For the next two days I was left alone in the SHU cell, without even any painkillers. I never received a visit from a doctor during almost twenty days I was in SHU. When I was transferred to 5 South, about \$40 of my personal property (ex. combination lock, typewriter ribbon, thermal shirt, etc.) was not returned to me. I felt as if I, who did nothing violent, suffered doubly. I wrote requests for reimbursement for this lost property, but nothing happened.

In the months after that attack, I started noticing that I was experiencing disorientation, imbalance, and forgetfulness. I also started losing my balance sometimes.

In December I was psychologically traumatized when another gay inmate was beaten, even more severely than I was. Having been recently beaten myself, I felt great disturbance at the lack of protection offered to gay inmates. The problem is that non-violent persons like me and my friend were housed in the same unit with violent felons. I asked that violent felons be moved to another floor, but only the perpetrators were moved. I did not feel safe.

The next thing that happened was when I slipped on some water on the floor, on Tuesday January 28, 2014. I was returning to my cell after 8 p.m. There was no "Wet Floor" sign, and I did not see the water puddle. Looking back on it, I think my fall was due to the imbalance I experienced after I was beaten. I fell hard on my left hip. As I lay on the floor, C.O. Mr. Torres called for medical assistance and kindly placed a pillow under my head to comfort me. I may have blacked out. I looked up to see nurse Mr. M. Saulibio ordering me gruffly: "Get up!" I could not move. He bent down and began pressing on my hip. The pain was so sharp I screamed in pain, and begged him to stop. He raised my leg and again I screamed in pain and begged him to stop. He told me that he had checked my femur and said, "Nothing is broken. It's only a sprain." I wanted to see a doctor, because I did not trust his diagnosis.

Mr. Saulibio and other officers moved me onto a stretcher. Once again, the pain was so severe I yelled loudly. Many inmates saw and heard all this. I heard inmate Joel Dreyer (who is a certified M.D.) yell to them, "It looks like his hip is broken. He should be taken to a hospital immediately." But the officers ignored him. After Mr. Saulibio kept moving my leg, I was fearful he would do even more damage if he kept on pressing on it. It felt like he was driving a large nail into my hip with a hammer. I feared he could kill me if this continued. I asked for a doctor, but someone said there was no doctor on duty.

The next thing they did was to take me to my cell. As two officers I do not recognize moved the stretcher upright at the door, they said, "I heard him refuse medical attention." I replied sharply, "I said no such thing. I want to see a doctor. That is ridiculous and untrue. I never refused to see a doctor." The two officers almost pushed me into the room, and told my cellmate

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

Mike Peterson to take me to my bunk. Mike did so, as one of them said about me: "He's full of shit." Then they left and locked the cell door.

I lay in agony all night, with no medical attention. Every time I tried to move, the pain was so sharp I felt like I was going to die. I could not get up to go to the toilet, and was forced to lie in my own urine when I had to urinate. I did not sleep at all.

At 7 a.m. the next morning when the cell door was unlocked, I begged the C.O. to get a doctor. He saw me lying wet in my bunk, and asked if I peed on myself. I said I had no choice, since I could not move. He looked disgusted. He said he would call the doctor. I waited and waited. Again later, when he came to the cell, he said the doctor would be there soon. But more hours passed.

Several inmate friends came by to express their outrage at the way I was being left there by MDC staff. They told me they kept telling the staff that I should be taken to a hospital, but as more time passed no doctor arrived.

At lunchtime my cellmate Mike Peterson tried to bring a lunch tray up for me to eat. But, he told me, the C.O. said to him "If Williams wants to eat, he must come downstairs." The C.O. knew that I could not even get up to go to the toilet, much less walk down a flight of stairs. So I lay there with no food.

Finally, about 1:30 p.m. officer Steve Ford arrived with a stretcher. He and some other staff got me onto it, and carried me down the stairs, to the elevator, and to medical X-ray. The X-ray technician told me the x-ray showed that my upper femur was broken in three places. When I told him what Mr. Saulibio said, that nothing was broken, the technician gave a look of disgust and said, "There is no way anyone could tell that, without an X-ray." He said a nurse should not be moving my leg around, and should not be making a diagnosis. At last I understood why I was in so much pain, and that Mr. Saulibio was totally wrong.

After that, nurses Buckingham and Smith treated me kindly, and called an ambulance. About two hours later, I was taken on a gurney downstairs to an ambulance. There I saw Mr. Torres again, who was by that time back on duty for the next day. I thanked him for his concern the night before, but complained about Mr. Saulibio hurting me. Mr. Torres and others put me into the ambulance and I was taken to White Memorial Hospital. When I was admitted into the hospital emergency room, it was about 4:30 p.m. when I was seen by a doctor. It was about twenty hours from the time of my injury.

Dr. Gallino was the surgeon who led the surgery. In following weeks I received physical therapy under the direction of Dr. Abboy. I remained at White Memorial Hospital for fifty days. The doctors told me that a steel rod was inserted inside my left femur, with three bolts to attach the three broken parts at the top of my femur. I received good medical care at White Memorial Hospital.

This injury has been the most painful experience of my life. I was brought back to MDC on March 19, 2014, and forced to wait several hours in a holding cell, with no pain medicine, before being wheeled in a wheelchair back to my old 5 South cell block. Numerous inmates expressed their concern, and their disgust at the long time I was left to languish in my cell before receiving medical care. Many are ready to testify as witnesses to the poor treatment I received. While I thank officers Torres, Ford, Smith, and Buckingham for their caring and humane assistance, the other staff -- especially nurse Saulibio -- exhibited gross negligence, to say the least.

When I checked into MDC, Mr. Saulibio was on duty. I asked him if he remembered telling me that "nothing was broken." Not only was he not apologetic, but he hautilly told me: "I could do nothing, since you refused medical treatment." I replied: "That is a lie, and you know it." I asked him if he had my signature, refusing medical treatment. He said nothing. Then he gave me a "Medical Duty Status" form, which states that he gave me a left knee support brace. Mr. Saulibio gave me nothing. On the contrary, when I asked for my evening medicines for pain, he said, "The pharmacy is closed, and and there is no way that anyone can get any medicines now."

About half an hour later, when I was back in 5 south, nurse Smith brought me medications. Once again, Mr. Saulibio had told me something which was not true. After all my negative experiences with him, I consider Mr. Saulibio to be a danger to my health and safety. I ask that I never have to deal with his cruel hostility and medical incompetence again. From my experience, I suspect he is a danger to others as well. Since my return to MDC, other inmates have told me he has been incompetent to them also. He is a disgrace to the medical profession, and does not belong in any position where he has contact with patients.

I testify this as my affidavit, signed this 3rd day of April, 2014.

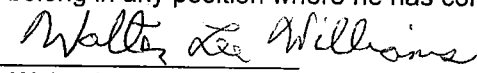

Walter Lee Williams

EXHIBIT 6

BOP Clinical Encounters and Radiology
Report Confirming Broken Left Femur

**Bureau of Prisons
Health Services
Clinical Encounter**

Inmate Name: WILLIAMS, WALTER LEE	Sex: M Race: WHITE	Reg #: 65562-112
Date of Birth: 11/03/1948	Provider: Saulibio, M. RN	Facility: LOS
Encounter Date: 01/28/2014 21:24		Unit: E06

Evaluation encounter performed at Health Services.

SUBJECTIVE:

INJURY 1 **Provider:** Saulibio, M. RN

Date of Injury: 01/28/2014 20:19 **Date Reported for Treatment:** 01/28/2014 21:24

Work Related: No **Work Assignment:** UNASSG

Pain Location: Hip-Left

Pain Scale: 9

Pain Qualities: Throbbing

Where Did Injury Happen (Be specific as to location):

5S B RANGE

Cause of Injury (Inmate's Statement of how injury occurred):

SLIP AND FALL

Symptoms (as reported by inmate):

REPORTS SLIP AND FALL WITH CONTACT TO L HIP/THIGH ONLY. PAIN AND LIMITED ROM OF HIP. DENIES HEAD INJURY, LOC, DYSPNEA, CP, DISTAL PARESTHESIAS OR ROM ISSUES TO DISTAL LLE.

OBJECTIVE:

Exam:

General

Appearance

Yes: Alert and Oriented x 3, Appears in Pain

No: Appears in Distress

Skin

General

Yes: Skin Intact, Dry, Warmth

Head

General

Yes: Symmetry of Motor Function, Atraumatic/Normocephalic

Peripheral Vascular

Legs

Yes: Dorsalis Pedis Normal, Posterior Tibialis Normal, Capillary Refill Normal

Musculoskeletal

Spine-Cervical

Yes: Normal Exam, Full Range of Motion, Non-tender on Palpation, Normal Bony Landmarks, Symmetric

Spine-Thoracic

Yes: Normal Exam, Full Range of Motion, Non-tender on Palpation, Normal Bony Landmarks, Symmetric

Spine-Lumbar

Yes: Normal Exam, Full Range of Motion, Non-tender on Palpation, Normal Bony Landmarks, Symmetric

Hip

Yes: Normal Bony Landmarks, Neurovascular Intact, Tenderness, Decreased Range of Active Motion

No: Step Offs, Muscle Spasm, Joint Deformity, Malalignment, Muscle Rupture, Muscle Atrophy, Swelling, Ecchymosis, Erythema, Warm to Touch L, Decreased Range of Passive Motion, Crepitus, Clicking,

Inmate Name: WILLIAMS, WALTER LEE	Sex: M Race: WHITE	Reg #: 65562-112
Date of Birth: 11/03/1948	Provider: Saulibio, M. RN	Facility: LOS
Encounter Date: 01/28/2014 21:24		Unit: E06

Exam:

Popping, Locking, Trauma, Laceration(s), Abrasion(s), Contusion(s), Hematoma

Femur

Yes: Tenderness L, Normal Bony Landmarks L, Symmetric L, Neurovascular Intact L

No: Step Offs L, Muscle Spasm L, Deformity - Bony L, Deformity - Muscle L, Deformity - Soft Tissue L, Swelling L, Ecchymosis L, Erythema L, Crepitus L, Instability L, Laceration/s L, Trauma L, Abrasion/s L, Contusion/s L, Broken Skin L, Exposed Bone L

Ankle/Foot/Toes

Yes: Normal Exam L, Full Range of Motion L, Non-tender on Palpation L, Normal Bony Landmarks L, Symmetric L, Normal Active ROM L, Normal Passive ROM L, Neurovascular Intact L

Back

Yes: Normal Exam L, Non-tender on Palpation L, Normal Bony Landmarks L, Symmetric L, Neurovascular Intact L

No: Step Offs L, Muscle Spasm L, Joint Deformity L, Malalignment L, Swelling L, Tenderness L, Inflammation L, Ecchymosis L, Erythema L, Crepitus L, Clicking L, Popping L, Locking L, Trauma L

ASSESSMENT:

Pain - Other

PLAN:

Disposition:

Follow-up at Sick Call as Needed
Return Immediately if Condition Worsens
Return To Sick Call if Not Improved

Other:

DURING EXAMINATION ON THE UNIT INMATE ASKED TO RETURN TO HIS CELL. INMATE ASSISTED INTO STRIKER GURNEY AND BROUGHT TO HIS CELL. ONCE IN HIS BED FURTHER EXAMINATION WAS ATTEMPTED WITH INMATE REFUSING. REFUSALS WITNESSED BY SIS MAROQUIN.

PHONE CALL TO UNIT OFFICER @ 2135 - INMATE IN BED SLEEPING AT THIS TIME WITH NO FURTHER COMPLAINTS.

Patient Education Topics:

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
01/28/2014	Counseling	Plan of Care	Saulibio, M.	Verbalizes Understanding
01/28/2014	Counseling	Access to Care	Saulibio, M.	Verbalizes Understanding

Copay Required:No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Saulibio, M. RN on 01/28/2014 21:36

Requested to be cosigned by Sinavsky, A. MD, CD.

Cosign documentation will be displayed on the following page.

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name:	WILLIAMS, WALTER LEE	Reg #:	65562-112
Date of Birth:	11/03/1948	Sex:	M
Encounter Date:	01/28/2014 21:24	Provider:	Saulbio, M. RN
		Race:	WHITE
		Facility:	LOS

Cosigned by Sinavsky, A. MD, CD on 01/30/2014 09:20.

**Bureau of Prisons
Health Services
Clinical Encounter**

Inmate Name: WILLIAMS, WALTER LEE	Sex: M Race: WHITE	Reg #: 65562-112
Date of Birth: 11/03/1948	Provider: Buckingham, M. PA-C	Facility: LOS
Encounter Date: 01/29/2014 10:54		Unit: E06

Sick Call/Triage encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1 **Provider:** Buckingham, M. PA-C

Chief Complaint: Pain

Subjective: fall on unit last night, pt complains of Left hip pain s/p fall. Will do x-ray and exam to determine need for specialized/emergency treatment. Pt is unable to stand, weight bear or ambulate.

Pain Location: Hip-Left

Pain Scale: 10

Pain Qualities: Deep | Shooting | Sharp | Unbearable | Throbbing | Stabbing

History of Trauma: Yes

When: 1/28/2014

Injury: to L hip

Mechanism: slip and fall

Onset: 12-24 hours

Duration: 12-24 Hours

Exacerbating Factors: attempting to move, ambulate or weight bear on L side

Relieving Factors: not moving

Comments:

OBJECTIVE:

Temperature:

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
01/29/2014	12:54 LOS	98.7	37.1		Buckingham, M. PA-C

Pulse:

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
01/29/2014	12:54 LOS	79			Buckingham, M. PA-C

Respirations:

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
01/29/2014	12:54 LOS	20	Buckingham, M. PA-C

Blood Pressure:

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
01/29/2014	12:54 LOS	129/73	Left Arm	Lying	Adult-regular	Buckingham, M. PA-C

SaO2:

<u>Date</u>	<u>Time</u>	<u>Value(%)</u>	<u>Air</u>	<u>Provider</u>
01/29/2014	12:54 LOS	99		Buckingham, M. PA-C

Exam:

Musculoskeletal

Hip

Yes: Neurovascular Intact, Joint Deformity, Malalignment, Swelling, Tenderness, Decreased Range of Active Motion, Decreased Range of Passive Motion, Trauma

No: Normal Exam, Full Range of Motion, Normal Bony Landmarks, Symmetric, Normal Active ROM,

Inmate Name: WILLIAMS, WALTER LEE	Sex: M	Race: WHITE	Reg #: 65562-112
Date of Birth: 11/03/1948	Provider: Buckingham, M. PA-C	Facility: LOS	Unit: E06
Encounter Date: 01/29/2014 10:54			

Exam:

Normal Passive ROM

ASSESSMENT:

Back, contusion, 922.31 - Current, Temporary/Acute, Initial
Hip, fracture, closed, 820.8 - Current, Temporary/Acute, Initial

PLAN:

New Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
	Ketorolac Tromethamine Inj 15 MG/ML	01/29/2014 10:54	60 mg Intramuscularly Deltoid, Left one time x 1 day(s) Pill Line Only
	Indication: Hip, fracture, closed		
	Start Now: Yes		
	Night Stock Rx#:		
	Source: Pyxis		
	Admin Method: Pill Line		
	Stop Date: 01/30/2014 10:53		
	MAR Label: 60 mg Intramuscularly Deltoid, Left one time x 1 day(s) Pill Line Only		
	One Time Dose Given: Yes		

New Radiology Request Orders:

<u>Details</u>	<u>Frequency</u>	<u>End Date</u>	<u>Due Date</u>	<u>Priority</u>
General Radiology-Spine / Lumbar-3 view AP/Lat/Spt	One Time		01/29/2014	Today
Specific reason(s) for request (Complaints and findings): fall injuring back yesterday. R/o fracture				

Disposition:

Transfer to Local Hospital

Other:

Pt has complex L hip fracture at the head of the L femur. X-rays discussed with Dr. Toh. Pt will be sent to local hospital for evaluation and treatment today.

Patient Education Topics:

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
01/29/2014	Counseling	Diagnosis	Buckingham, M.	Verbalizes Understanding

Inmate Name: WILLIAMS, WALTER LEE

Date of Birth: 11/03/1948

Encounter Date: 01/29/2014 10:54

Sex: M Race: WHITE
Provider: Buckingham, M. PA-C

Reg #: 65562-112

Facility: LOS

Unit: E06

Copay Required:No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Buckingham, M. PA-C on 01/29/2014 13:01

Requested to be cosigned by Toh, R. MD.

Cosign documentation will be displayed on the following page.

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name:	WILLIAMS, WALTER LEE	Reg #:	65562-112
Date of Birth:	11/03/1948	Sex:	M
Encounter Date:	01/29/2014 10:54	Provider:	Buckingham, M. PA-C
		Race:	WHITE
		Facility:	LOS

Cosigned by Toh, R. MD on 01/30/2014 06:07.

**Bureau of Prisons
Health Services
Clinical Encounter - Administrative Note**

Inmate Name:	WILLIAMS, WALTER LEE	Reg #:	65562-112
Date of Birth:	11/03/1948	Sex:	M
Note Date:	01/29/2014 11:53	Race:	WHITE
		Facility:	LOS
		Unit:	E06
		Provider:	Toh, R. MD

Admin Note encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1 **Provider:** Toh, R. MD

FOR DIRECT ADMIT TO WHITE MEMORIAL MEDICAL CENTER MED SURG 4 NORTH RM 4507 UNDER THE SERVICE OF DR. ABOY BUT DR. BANSAL JR. WILL TAKE CARE OF PATIENT AS DR. ABOY WILL BE OUT OF TOWN FROM NOON TODAY UNTIL SUNDAY.

REASON FOR DIRECT ADMIT: ACUTE LEFT NECK OF FEMUR FRACTURE DUE TO FALL INJURY LAST NIGHT WHEN HE SLIPPED ON THE WET FLOOR BY WET READING OF LEFT HIP X-RAY.

New Consultation Requests:

<u>Consultation/Procedure</u>	<u>Due Date</u>	<u>Priority</u>	<u>Translator</u>	<u>Language</u>
Internal Medicine	01/29/2014		No	

Reason for Request:

FOR DIRECT ADMIT TO WHITE MEMORIAL MEDICAL CENTER MED SURG, 4 NORTH, RM 4507, ARRANGED BY BED NURSING SUPERVISOR, KRIS, UNDER THE SERVICE OF DR. ABOY BUT DR. BANSAL JR IS COVERING FOR DR. ABOY SINCE THE LATTER WILL BE OUT OF TOWN FROM NOON TODAY UNTIL SUNDAY FOR THIS 66 Y/O MALE WITH ACUTE LEFT FEMUR (HIP) NECK FRACTURE DUE TO FALL ON SLIPPERY WET FLOOR LAST NIGHT WITH INABILITY TO MOVE LEFT LOWER EXTREMITY

Provisional Diagnosis:

ACUTE LEFT HIP FRACTURE (NECK OF FEMUR) SECONDARY TO FALL ON WET SLIPPERY FLOOR

Additional Records Required for Consultation:

Complete Record

Copay Required:No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Toh, R. MD on 01/29/2014 12:08

**Bureau of Prisons
Health Services
Clinical Encounter - Administrative Note**

Inmate Name:	WILLIAMS, WALTER LEE	Sex:	M	Race:	WHITE	Reg #:	65562-112
Date of Birth:	11/03/1948	Provider:	Toh, R. MD	Facility:	LOS	Unit:	E06
Note Date:	01/29/2014 11:27						

Procedure encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1 **Provider:** Toh, R. MD
WILL ADD LEFT HIP X-RAY TO EVALUATE FOR FALL INJURY

New Radiology Request Orders:

<u>Details</u>	<u>Frequency</u>	<u>End Date</u>	<u>Due Date</u>	<u>Priority</u>
General Radiology-Hip-3 View AP/Lat/Obl [Left], General Radiology-Sacrum - Coccyx-General	One Time		01/29/2014	Today

Specific reason(s) for request (Complaints and findings):

PLEASE EVALUATE LEFT HIP FOR POSSIBLE FRACTURE FOR THIS 66 Y/O MALE WHO SAID HE SLIPPED AND FELL ON HIS LEFT HIP LAST NIGHT AT 8 PM AND COULD NOT LIFT HIS LEFT LOWER EXTREMITY; ALSO EVALUATE LUMBO-SACRAL-COCCYX

Copay Required: No **Cosign Required:** No
Telephone/Verbal Order: No

Completed by Toh, R. MD on 01/29/2014 11:31

DIANAssociates

PRIME : EMTEC
UNIVERSITY OF MARYLAND
RADIOLOGY REPORT

PATIENT NAME: WILLIAMS WALTER LEE
DATE OF BIRTH: 19481103
PATIENT NUMBER: 65562-112
REF. PHYSICIAN: TOH
INSTITUTION NAME: MDC Los Angeles
EXAM DATE: 2014/01/29 15:04
OBSERVATION DATE: 2014/01/30 11:10
EXAM TYPE: S/P FALL. R/O LEFT HIP FRACTURE. HIP
READING RADIOLOGIST: Thu Nguyen, MD

HISTORY and STUDY COMMENTS

S/P FALL. R/O LEFT HIP FRACTURE. Hip-joint

FINDINGS AND CONCLUSION

Abnormal. Only 1 view. Acute, comminuted, displaced left femoral intertrochanteric fx.

Findings and Conclusion ----- Abnormal. Only 1 view. Acute, comminuted, displaced left femoral intertrochanteric fx.

1/30/14
THE PAT WAS
ADMITTED TO WVC
HOSPITAL ON 1/29/14

A. SINAVSKY, M.D.
CLINICAL DIRECTOR
MDC-LOS ANGELES

EXHIBIT 7

Statement of Inmate Michael Peterson

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Fernandez, Manuel; Gits, Christina; Williams, Opal C

SUBJECT: witness Peterson

DATE: 04/09/2014 06:01:26 PM

This is my witness statement regarding the injury of Walter Williams, on January 28, 2014. At about 8:15 p.m., I came up to my room in 5 South at Los Angeles Metropolitan Detention Center. My cellmate Walter Williams was just leaving the room when I was coming in. Soon after, the guard locked the door and I was concerned that Walter had not returned. I was looking out the window of the door, trying to see where Walter was. There was a commotion, and I heard someone scream. I recognized it was Walter's voice calling for help. Then I saw staff coming up the stairs. I could not see what was going on, but I could hear what was being said. Walter screamed in pain, and then I heard him say: "Stop! That hurts!" Then he yelled this statement again.

After that, C.O. Torres unlocked my cell door. A short man I did not know asked my name. I answered, "Mike." He looked at me with irritation and said, "Your last name!" Then he arrogantly said, "I'm a Lieutenant. Address me as such." Then he asked me which bunk was mine. I told him the upper one. He ordered me to get into my bunk, and stay there. After I climbed up, they wheeled a guerny with Walter up to the door. The officer told Walter to get off, and go to his bunk. Walter said he was in too much pain to move.

A nurse in a blue medical uniform said to Walter that he had checked his leg out and moved it through all its motions. He said, "It's not broken. You just have a bruise." It looked to me like they were trying to push Walter off the guerny. Walter said again that he could not walk, and asked to be taken to a hospital. The Lieutenant then said that Walter refused medical attention. Walter replied sharply, "No, I did not refuse. That's ridiculous."

When Walter could not walk, the lieutenant said to me, "I changed my mind. You get down and help him in." I came over and put my arm around Walter and tried to move him. He was crying in pain. I felt bad because it was so painful for him, and I knew he should not be forced to walk. The guards did not help at all.

Once I got Walter into his bed, with great difficulty, I turned and said to them: "I think he is hurt very bad." The lieutenant replied to me: "He's full of shit." I could not believe he was so callous, and so devoid of empathy for another person. I looked at Mr. Torres, who is a good man but he gave a shrug like he had no power to do anything against the word of the nurse and the officer. The door was locked, and they left.

I felt great anxiety as I tried to fall asleep. I heard Walter in the bed below me, still crying in pain every time he tried to move. When I woke up the next morning, he was still in exactly the same position I put him in the night before. During the night he had tried to use some plastic bowls to urinate in, and he had spilled one of them on himself. It was obvious he was still in pain. He looked like he had not slept all night. As the guard opened the door, Walter begged for a doctor. He looked horrible.

After I walked downstairs to eat breakfast, I told the C.O. (I think his name was De La Hoyas), that my cellmate was badly hurt, in severe pain, and had spilled urine on himself because he could not move. He responded sarcastically: "So, clean him up!" Then he went back to what he was doing. I was dumbfounded that he did not call the doctor. No staff member seemed to be doing anything at all to help Walter. When I came back to the room, bringing some dry cereal for Walter to eat, some other inmates were trying to clean Walter. I told them what the C.O. said.

For the next several hours, Walter lay in exactly the same position. We inmates felt powerless to do anything. Then at lunchtime, I asked the C.O. if I could take a lunch tray up to the room for Walter. He said, "Hell no. If he wants it, he can come down and get it."

Walter had to lie there with no attention and no food. About noon a nurse came with a wheelchair. He said he would help Walter walk down the stairs to the wheelchair, but Walter still could not even move without great pain. The nurse said, "Then there is nothing we can do." I thought that was ridiculous. About an hour later, other staff showed up with a stretcher. I saw them carry Walter out. We inmates said, "Finally!" Later, when I asked the same C.O. if Walter broke his hip, he replied "Something like that." He sounded irritated, more concerned about his own self-interest than with Walter's well-being. Even after he knew that Walter was seriously injured, he did not express the least care. That typified this C.O.'s entire attitude the whole day. The treatment Walter received was gross negligence, without a doubt.

Signed on April 9, 2014.


Mike Peterson

EXHIBIT 8

Statement of Inmate Joel Dreyer, M.D.

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Faderman, Lillian; Fernandez, Manuel; Gits, Christina; Williams, Opal C

SUBJECT: witness Dreyer

DATE: 03/31/2014 05:53:07 PM

When I was standing in my room 546, on the evening of January 28, 2014, with the door open, I saw Walter Williams walking toward his room, which was next door to mine. I saw him fall, and as he fell he yelled "Oh, my God." I came out of my room, as did some other inmates who were concerned about him. Walter's face was contorted, and he screamed "I'm in pain" three times.

I said to him, "I hope you didn't break something." In a short time, a couple guards came up. I remember saying to them: "He might have a broken hip. Take him to a hospital." A short dark-haired guard came up. I said to him: "Let me take a look, I am a doctor. I'm a licensed M.D." *

The man replied to me: "No, you're an inmate."

I did not respond to his insult, but I repeated to the other guards: "Make sure to take him to a hospital. He could have a broken bone. He is in severe pain." None of them responded; they all ignored me.

I was worried about Walter as I watched them cart him past my door to his room, on a long stretcher. I remember saying to my roommate: "I hope they take him to the hospital right away." I felt sure he had a serious injury. That night I heard Walter screaming in pain, and I could not believe they had left him in his room. Just like I predicted and told them, I later learned he did in fact have three fractures.

About 10 a.m. the next day, I saw Walter still in his room. He was still yelling in pain. They did not come to get him, in my best recollection, until sometime after 1 p.m. I saw them haul him out on a stretcher.

This is my testimony as a witness, signed March 31, 2014.



Joel Dreyer, M.D.

I received my M.D. from Wayne State College of Medicine, in Detroit, did my internship at Sinai Hospital in Detroit, and had another four years of residency in forensic medicine and psychiatry.

EXHIBIT 9

Statement of Inmate Donald Goff

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Faderman, Lillian; Fernandez, Manuel; Gits, Christina; Williams, Opal C

SUBJECT: witness Goff

DATE: 03/29/2014 06:36:41 PM

This is my witness statement to the injury of Walter Williams. On January 28, 2014, just before evening lockdown, I was at the door of my room. I saw Walter Williams immediately after he fell, just several feet from my door. He was screaming and lying on the floor. C.O. Torres yelled for everyone to go to their room, so he could help Williams. He was trying to help Williams. Several officers came with a gurney. They moved Williams onto the gurney, as he screamed in extreme pain. They said that Williams was OK, and he should be put into his room. Nurse Saulibio said there was nothing wrong with Williams. Williams said the pain was too great, and he called for a doctor. He wanted more help. Inmate Joel Dryer, who is an M.D., yelled that it looked like Williams' hip was broken, and they should take him to a hospital. But the officers ignored him. At no time did Williams refuse medical treatment. On the contrary, he was screaming for help. But they took the gurney to Williams' cell and made him go inside. The guards standing around, near my door, said "He's alright, he'll be OK."

The next morning, I was disturbed to find that Williams was still in his cell. I have never in my life seen anyone treated with so much disregard as they treated Williams. If not criminal, it verges on it. That day Williams was still lying in his cell, immobile, but the C.O. on duty told his cellmate that if Williams wanted to eat he must come downstairs. Williams was still lying there until after lunch, when officers finally came to get him. I heard him scream as they put him into the gurney. I saw them take him away. It was obvious Williams was in great pain, and could not walk. The bad treatment Williams received was despicable.

This is my statement, signed this 29th day of march, 2014.

Donald Goff

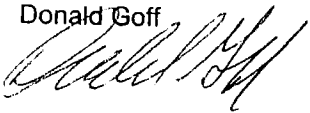


EXHIBIT 10

Statement of Inmate Romie Tucker

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Faderman, Lillian; Fernandez, Manuel; Gits, Christina; Williams, Opal C

SUBJECT: witness Tucker

DATE: 03/29/2014 08:55:39 AM

About 8 o'clock on the evening of January 28, 2014, I saw Walter Williams walking upstairs in 5 South at Los Angeles Metropolitan Detention Center, as he slipped and fell on his left side. Because I live right there, I saw there was water on the floor, and no cones saying "Wet Floor." I walked carefully around the water. But when Williams came up he evidently did not see the water, and he fell hard and hollered. He continued to holler in pain for about ten minutes. I saw Officer Torres carefully comforting him by putting a pillow under his head. After about ten minutes nurse Saulibio arrived. Before he even inspected Williams he ordered: "Get up!" But Williams could not move. He bent over Williams and I heard him say, "He's alright," even though Williams was screaming in pain as Saulibio moved his leg back and forth. I don't know why he did that. I never heard Williams say anything about refusing medical treatment. He was screaming loudly in pain. The officers discussed among themselves what to do, and after about twenty minutes they moved Williams onto a stretcher. I was shocked that they did not immediately take him out to the hospital. We inmates realized Williams was seriously hurt. Nobody screams like that if faking it.

The next morning I went to Williams' room and he was still there, with no medical attention. I saw him lying in his bunk, with about five plastic bowls full of urine on the floor. He said he had not been able to go to the toilet during the night. I told my cellmate Frisco to come in and empty them for him, and he did. I had to go see my lawyer, so I left. A lot of inmates felt very sad, because we all realized Williams was seriously injured. He was gone in the hospital for about two months, and when he returned we heard that his hip had been broken in three places. What they did in denying him medical treatment for so long, is terrible.

This is my statement, signed this 28th day of March, 2014



Romie Tucker

home telephone 562-230-9640

EXHIBIT 11

Statement of Inmate Phillip R. Roland

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Faderman, Lillian; Fernandez, Manuel; Gits, Christina; Williams, Opal C

SUBJECT: witness Roland

DATE: 03/30/2014 05:54:27 PM

Statement Regarding Walter Williams

After 8:00pm on January 28, 2014, I heard loud cries of agony coming from the center of MDC 5-South's B Range, almost over my head. I immediately left my cell to see C.O. Torres running up the stairs to the location of the incident. A few inmates had gathered at the scene. C.O. Torres told everyone to go to their cells. I did so, while the cries of agony continued. From the sound of the voice, I determined that Walter Williams was on the floor painfully moaning.

A few minutes later, I left my cell and walked out several feet. I saw several individuals in non-inmate uniforms, surrounding Walter. I think they were dark blue medical staff uniforms. I went back to my cell and heard more of Walter's cries and moans and several unknown voices. Walter made it quite clear that he wanted a doctor and did not want to be moved to his cell. Someone said, "Nothing is broken; it's OK." Apparently, then, the group attempted to move Walter to his cell. His cries got even louder during the move.

At no time did anyone ask Walter if he desired medical treatment. I could hear just about everything that was said, especially Walter's voice. At no time did Walter refuse medical treatment. In fact, it was quite the opposite. He pleaded to be sent to the hospital and kept asking everyone to call for a doctor.

At this point I closed the door of my cell and did my best to tune all of this out. The next morning at approximately 6:30am, we were informed that Walter was still in his cell.

Signed this 30th day of March, 2014.

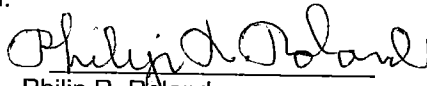

Philip R. Roland
inmate 66594-112

EXHIBIT 12

Statement of Inmate John Boone

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Fernandez, Manuel; Gits, Christina; Williams, Opal C

SUBJECT: witness Boone

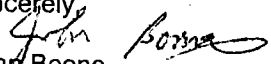
DATE: 04/02/2014 05:40:21 PM

To Whom It May Concern:

My name is John Boone, inmate # 17808-111. On January 28, 2014, at approximately 8 p.m. on our 5-South floor, I witnessed Walter Williams on the ground, yelling in extreme pain. The screaming was so loud that the entire floor had to hear him. I did not know the extent of his injury but it was clear something was gravely wrong with his health.

I witnessed several B.O.P. staff members observing Mr. Williams, until a large man wearing a dark blue medical uniform came and grabbed Mr. Williams by his lower extremity. Mr. Williams screamed loudly. He continued to tell the B.O.P. staff he was in severe pain as he lay there. The B.O.P. staff, using a stretcher, carried Mr. Williams back to his cell. You could hear him screaming the entire way as they placed his body in the cell and locked the door behind him. I could periodically hear Mr. Williams yelling in pain all night long. No one came to take him for medical treatment until later the next day.

Sincerely,


John Boone
April 2, 2014

***** SEALED DOCUMENT *****

Exhibit 13

***** SEALED DOCUMENT *****

Physical Therapy Clinical History,
Problems, and Medications Prescribed

EXHIBIT 14

Hospital Physical Therapy Report

310-555-6666

06:51:50 p.m.

02-13-2014

65562-112
5/8Adventist
HealthWHITE MEMORIAL MEDICAL CENTER
1720 CESAR E CHAVEZ AVE., Los Angeles, CA 90033, (323) 268-5000

514927

Admit
Date/Time: 2/05/2014 14:07
Discharge
Date/Time:

PHYSICIAN FACE SHEET

Patient Name and Address					Phone		Account Number		Medical Record No.	
WILLIAMS, WALTER LEE					817 477-0400		514927		130-25-39	
535 N ALAMEDA ST					Other Phone #:		F/C		Service	
BOOKING 65562 112							5863		SNF	
LOS ANGELES CA 90012-					Social Security Number		Mode of Arrival		Type	
					000-00-0001		TF 4N ORT		Room	
Birth Date		Age	Sex	Marital Status	Religion	Drivers License No.		Primary Language Spoken		Accom.
11/03/1948		065Y	M	S	N/A	NA		English		2
Birth Place		Previous/Maiden Name			Spouse			Written Language		
								Race		

GUARANTOR	Name		Occupation		Relation		Birth Date		Phone	
	METROPOLITAN, DETENTION C		METRO		OTHER		1/01/1888		213 485-0439	
	Address								Social Security Number	
	535 N ALAMEDA STREET		LOS ANGELES		CA 90063				xxx-xx-0001	
Guarantor Employer Name and Address		535 N. ALAMEDA ST		LOS ANGELES, CA 90012		213 485-0439				
METROPOLITAN DETENTION CENTER										

Relative/Friend	Address	Relation
Relative/Friend	Address	Phone
Relative/Friend	Address	Relation
Relative/Friend	Address	Phone

Doctor Information		Dr. Phone #s
ATT	ABBOY, RAMADAS	(323) 263-9779
ADM	ABBOY, RAMADAS	(323) 263-9779
REF		(000)

Initial Diagnosis Impression/Statement of Illness/Injury
POST OPERATIVE DAY 4 STATUS POST LEFT
HIP PINNING

ACCIDENT INFORMATION	Date:	Type:	Service related to accident:
Location:	Description:		

Patient Employer	Phone:	LMP
INMATE	Occupation: UNEMPLOYED	
	Retirement Date: / /	

CARRIER 1	INTEGRATED MED SOLUTIONS		Phone: (817) 477-0400		Subscriber Name	
	CLAIMS DEPARTMENT				WILLIAMS, WALTER	
	1485 HERITAGE PARKWAY				Relation	
	MANSFIELD, TX 76063				SELF	
Subscriber ID (Cert, SSN, or HIC number)		Group Name		Group Number		Subscriber Birth Date
BK#65562-112						11/03/48
						Pre-authorization #
						PENDING

CARRIER 2	Phone:		Subscriber Name		
			Relation		
	Subscriber ID (Cert, SSN, or HIC number)		Subscriber Birth Date		
	Group Name		Pre-authorization #		
Group Number					

CARRIER 3	Carrier 3 Name / Subscriber / Relation / Policy # / Group #	Phone:
-----------	---	--------

Remarks: NOT FOR GOVERNMENT CONVENIENCE PER	LUZ IN SNF
---	------------

Transferring Facility:

Physht 12/12 bpt

Source	Route	Requested By
D	2	PEREZLE



1302539-514927

Dr. Toh, Physician
MDC LOS ANGELES
Metropolitan Detention Center
535 North Alameda St.
Los Angeles CA. 90012

323

13:18:54 02-07-2014

65562-112

Date of Admit 2/5/14 Date of Eval. 2/6/14 Ordering M.D.: Abboy Insurance: MDC
Diagnosis: S/P @ hip pinning; ↓ ADLs/mobility Precautions: fall risk, skin risk, wbat @ LE
HPI: Pt. is 65 y.o. Caucasian male who sustained 3-part fx. to @ hip 2° fall backwards. @ hip pinning on 1/31 by Dr. Galloni.
PMH: HIV @, neuropathy, GERD

PLF: Gait: ① S AD ADLS: ① C diff. C LB Lives With: MDC
Home: Apt. Condo House Stairs: 5th Floor Rail: Rt. Lt. Other: DME @, shower stall @

***See MDS Specific tests for ROM/Strength

ROM 0 = no limitations	Neck	ROM	STR	Comments (tone, spasticity, degrees, etc)
1 = limitation on one side	Arm (shoulder/elbow)	0	0	WFL @ UE
2 = limitation on both sides	Hand (wrist/fingers)	0	0	
STRENGTH 0 = no loss	Leg (hip/knee)			
1 = partial loss	Foot (ankle/toes)	1	2	① hip / 80° 2° pain
2 = full loss	Other limitation or loss	0	0	① hip / 1/5 ① knee / 1/5 ① knee / 1/5, ① hip / 1/5 2/6 5/5

PHYSICAL FUNCTIONING

MDS Self Performance Key (A)

0 Independent	No help or oversight	Support Provided Key (B)
1 Supervised	Oversight/encouragement or cueing provided	0 No set up or physical help
2 Limited Assist	Physical help in guided maneuvering of limbs or other non-weight bearing help (contact guard assist)	1 Set up help only
3 Extensive Assist	Performs part of activity with help for weight bearing support or full staff performance in part of activity; Quality (min. mod. or max.)	2 One person physical assist
4 Total Dependence	Full staff performance of activity	3 Two + Person Assist
8 Did not occur	NT	8 Did not occur

Bed Mobility	How resident moves to/from lying position, turns side to side, and positions body while in bed.	SELF/SUPP	COMMENTS
Transfer	How resident moves between surfaces - to/from bed, chair, wheelchair, standing position (EXCLUDE to/from bath and toilet).	3 2	max @
Walk In Room	How resident walks between locations in his/her room	3 3	mod @ 2 ad @
Walk in Corridor	How resident walks in corridor ON UNIT	3 3	Gait: wbat 10'
Locomotion on Unit	How resident moves between locations in his/her room and adjacent corridor on same floor. If in wheelchair, self-sufficiency once in chair.	8 8	mod @ 2, max
Locomotion Off Unit	How resident moves to and returns from off unit locations (e.g. dining, activities or treatment rooms). If facility has only one floor, how resident moves to/from distant areas on the floor. If in wheelchair, self-sufficiency once in chair.	8 8	to advance @ LE, max 1/5 for 1, tech 2, max @ LE
Dressing	How resident puts on, fastens, and takes off all items of street clothing, including donning/doffing prosthesis.	3 2	ua: CGA
Eating	How resident eats and drinks regardless of skill includes intake of nourishment by other means (e.g. tube feeding, parenteral feeding).	0 1	LB: max @
Toilet Use	How resident uses the toilet room (or commode, bedpan, urinal) transfers on/off toilet, cleanses, changes pad, managed ostomy or catheter, adjust clothes.	4 2	hygiene: dep. transfer: mod. @ x 2

White Memorial Medical Center Los Angeles, CA

INTERDISCIPLINARY PT/OT EVALUATION SNF SNF DEPARTMENT



252

Page 1 of 2

WILLIAMS, WALTER LEE
M 085Y 11/03/1948 ATT 1024 ABBY, RAMADAS
ACCT: 514927 ADM 1024 ABBY, RAMADAS
MR # 1302539
ADMIT: 2/05/2014 REF



SNF F
5853

9621863 (6/11)

Dr. Toh, Physician
MDC LOS ANGELES
Metropolitan Detention Center
535 North Alameda St.
Los Angeles CA. 90012

**White Memorial
Medical Center**

**Adventist
Health**

For WMMC use only

WILLIAMS, WALTER LEE
M 085Y 11/03/1948 ATT 1024 ABBY, RAMADAS
ACCT: 614827 MR # 1302539 ADM 1024 ABBY, RAMADAS
ADMIT: 2/06/2014 REF SNF F
5883

Inmate Status Report To: IMS

Attention: Ashley Telgland Fax#: 817-842-9058 Phone#: 817-842-2831
Case Manager: PAULITA T BOYLES Fax#: (323) 265-5038 Phone#: (323) 268-5700 x 221

WHITE MEMORIAL MEDICAL CENTER

Patient Name: WILLIAMS WALTER LEE Registered #: _____

Date(s) of review: 02/07/14

Hospital Unit Patient Resides in Today: ☐ Med/Surg ☐ ICU ☐ CCU ☐ Telemetry ☒ SNF
☐ Swing Bed ☐ Rehab ☐ LTAC ☐ Psych ☐ Other: _____

Working Diagnoses/PMH: Left hip pinning 1 ORIF

Medications: Acyclovir 400mg 1 tab po BID, Vit B-12 100mcg po q morning; Generon
2 tabs po HS, Chlorthal 4mg po q PM, Tramadol 1 tab po daily, Candesartan 30
mg po, Neurontin 600mg 2 caps q PM, Kaletra 2 tabs po BID, fentanyl 1 cap BID
Clinical, current progress: Physical 20 mg tab q PM, Risperidone 4 mg po HS
please see attached
physical therapy reports

Action and Plan of Care:

Continue current medical care mgt. Wound dressing
daily

Diagnostic Procedure(s) (Performed):

Diagnostic Procedure(s) (Pending):

Discharge Plan(s):

Return to MDC

Medications at discharge:

PRIVACY NOTICE

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Dr. Toh, Physician
MDC LOS ANGELES
Metropolitan Detention Center
535 North Alameda St.
Los Angeles CA. 90012

Dr. Ton, Physician
MDC LOS ANGELES
opulation Detention Center
535 North Alameda St.
Los Angeles CA. 90012

310-555-6666

06:54:06 p.m. 02-13-2017 65562-112/8

Date	Initials	Co-sign	Total Time	Evaluation	Func. Mob.	Ther. Ex.	Gait	Pt. Ed.
2/6/14	GD		60	✓	30	15	15	
2/7/14	GV		60		30	15	15	
2/10/14	GD		60		30	30		
2/19/14	GV		30		15	15		

Dx: *Left ankle 1st (L) hip running 2nd*
Precautions: *fall, skin*
(PWB) WBAT TTWB NWB
GLC

Self Performance Key (A)		Support Provided Key (B)		Function Level (C)	
0	Independent	0	No set up or physical help	1	Independent - safe alone
1	Supervised	1	Set up help only	2	Supervised - patient requires verbal cues or SBA for safety
2	Limited Assist	2	One person physical assist	3	SBA/CGA
3	Extensive Assist	3	Two + person assist	4	Min/Mod assist
4	Total Dependence	4	Did not occur	5	Max/U
5	Did not occur				Activity did not occur during session

(Min) Minimal Assist - Pt performs >75% (Mod) Moderate Assist - Pt performs 25-75% (Max) Maximal Assist - Pt performs <25%
 FWW - Front wheel walker PUW - Pick up walker SBQC - Small based quad cane LBQC - Large based quad cane SPC - Single point cane
 PWB - Partial Wt Bearing WBAT - Wt Bearing as tolerated TTWB - Toe touch wt bearing NWB - Non wt bearing

DAILY FUNCTIONAL STATUS

DATE	Bed Mobility			Transfers			Gait in Room			Gait in Hall			Gait on Unit			Gait Off Unit			Gait time w/o sitting	Dist. w/o rest	A D	Sit Bal.	Stand Bal.	W/C	Stairs
	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C							
2/6/14	3	2	max	3	3	max	3	3	max	8									8'	10'	FWW	2	3	8	8
2/7/14	3	2	max	3	3	max	3	3	max	8									8'	12'	FWW	2	3	8	8
2/9/14	3	2	max	3	2	max	3	2	max	8									10	15'	Fw	2	3	8	8
2/10/14	3	2	max	8															8		Q	8	8	8	

Signature: *[Signature]* Initials: *GD* Signature: *[Signature]* Initials: *GV*
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DAILY TREATMENT RECORD AND
STATUS REPORT-REHAB CENTER
PHYSICAL THERAPY DEPARTMENT-SNF

Page 1 of 2



364

WILLIAMS, WALTER LEE 3156-02
 M 085Y 11/03/1949 ATT 1024 ABBOT, RAMADAS
 ACCT: 514927 ADM 1024 ABBOT, RAMADAS
 MR # 1302639 REF
 ADMIT: 2/05/2014
 SNF F 5683



9625021 (9/12)

Dr. Toh, Physician
 MDC LOS ANGELES
 Metropolitan Detention Center
 535 North Alameda St.
 Los Angeles CA. 90012

310-555-6666

06:53:27 p.m. 02-13-2014 65562-112 578

Date	Initials	Co-sign	Total Time	Evaluation	Funct. Mob.	Ther. Ex.	Gait	Pt. Ed.
2/11/14	ED		60		30		30	
2/12/14	ED		60		15	15	30	

Dx: *Hand and Sp. Orthopedics*
 Precautions: *fall, skin*
 (PWB) WBAT TTWB NWB

Self Performance Key (A)		Support Provided Key (B)		Function Level (C)	
0	Independent	0	No set up or physical help	1	Independent - safe alone
1	Supervised	1	Set up help only	2	Supervised - patient requires verbal cues or SBA for safety
2	Limited Assist	2	One person physical assist	3	SBA/CGA
3	Extensive Assist	3	Two + person assist	4	Min/Mod assist
4	Total Dependence	4	Did not occur	5	Max/U -
5	Did not occur	5	Did not occur	6	Activity did not occur during session

(Min) Minimal Assist - Pt performs >75% (Mod) Moderate Assist - Pt performs 25-75% (Max) Maximal Assist - Pt performs <25%
 FWW - Front wheel walker PUW - Pick up walker SBQC - Small based quad cane LBQC - Large based quad cane SPC - Single point cane
 PWB - Partial Wt Bearing WBAT - Wt Bearing as tolerated TTWB - Toe touch wt bearing NWB - Non wt bearing

DAILY FUNCTIONAL STATUS

DATE	Bed Mobility			Transfers			Gait In Room			Gait In Hall			Gait on Unit			Gait Off Unit			Gait time w/o sitting	Dist. w/o rest	A D	Sit Bal.	Stand Bal.	W/C	Stairs	
	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C								
2/11/14	3	2	mod	3	2	mod	3	2	mod	3	2	mod	3	2	mod	8			→	10'	15', 10'	FWW	2	3	8	8
2/12/14	3	2	mod	3	2	mod	3	2	mod	3	2	mod	3	2	mod	8			→	8'	20', 15', 10'	FWW	1/2	3	8	8

Signature: *[Signature]* Initials: *[Initials]* Signature: *[Signature]* Initials: *[Initials]*
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DAILY TREATMENT RECORD AND STATUS REPORT-REHAB CENTER
 PHYSICAL THERAPY DEPARTMENT-SNF



364

WILLIAMS, WALTER LEE 3166-02
 M 065Y 11/03/1948 ATT 1024 ABBY, RAMADAS
 ADCT: 614927 ADM 1024 ABBY, RAMADAS
 MR # 1302539
 ADMIT: 2/05/2014 REF SNF F 5883

9625021 (9/12)

Dr. Toh, Physician
 MDC LOS ANGELES
 Metropolitan Detention Center
 535 North Alameda St.
 Los Angeles CA. 90012

310-555-6666

06:55:30 p.m. 02-13-2014 65562-112/8

Date	Initials	Co-sign	Total Time	Evaluation	ADL Trng.	IADL Trng.	Ther Act/ Exercise	AD Trng.	Fxnal. Mod/ Transfer Trng. For ADL's	Safety Trng.	Family Trng.						
2/10/14	Ek.	30	60		30				30								
2/11/14	Ek.	30	60				30		30								

Dx: Hip pinning; ADL's
Precautions: fall.
PWB WBAT TTWB NWB
LLF

Self Performance Key (A)		Support Provided Key (B)		Functional Level (C)
0	Independent	0	No set up or physical help	I - Independent - safe alone
1	Supervised	1	Set up only	S - Supervised, patient requires verbal cues or SBA for safety
2	Limited Assist	2	One person physical assist	SBA/CGA
3	Extensive Assist	3	Two + person assist	Min/Mod Assist
4	Total Dependence	4	Did not occur	Max/U
5	Did not occur			Activity did not occur during session

(Min) Minimal Assist - Pt performs >75% (Mod) Moderate Assist - Pt performs 25-75% (Max) Maximal Assist - Pt performs < 25%

DAILY FUNCTIONAL STATUS

Date	Upper Body Dressing			Lower Body Dressing			Fxnal. Transfer (tub, toilet, bed)			Toileting			Personal hygiene & grooming			Eating			Bathing			Task Segmentation	Sit. Bal.	Stand Bal.
	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	UB	LB				
2/10/14	0	1	5/10	3	2	mod	3	2	max	4	2	dep	0	1	5/10	5			1	1	SBA			
2/11/14	5						3	2	mod	5									3	2	max		2	3
																							2	3

Signature: Ed. Kim, OTS (Ek.) Initials: (Ek.) Signature: [Signature] Initials: (S)
 Signature: () Initials: () Signature: () Initials: ()

DAILY TREATMENT RECORD AND STATUS REPORT
SNF DEPARTMENT



325

Page 1 of 2

WILLIAMS, WALTER LEE 3166-02
 M 085Y 11/03/1948 ATT 1024 ABBY, RAMADAS
 ACCT: 514827
 MR # 1302630 ADM 1024 ABBY, RAMADAS
 ADWIT: 2/05/2014 REF
 SNF F 6663



9625038 (8/11)

Dr. Toh, Physician
 MDC LOS ANGELES
 Metropolitan Detention Center
 535 North Alameda St.
 Los Angeles CA. 90012

310-555-6666

06:54:51 p.m. 02-13-65562-112/8

Date	Initials	Co-sign	Total Time	Evaluation	ADL Trng.	IADL Trng.	Ther. Act/ Exercise	AD Trng.	Emal. Mod/ Transfer Trng. For ADL's	Safety Trng.	Family Trng.						
2-12-14	SR		60				30										
2/13/14	SR		60		30		30		✓								

Dx: SPC hip pinning
Precautions: PWB WBAT TTWB NWB
DE

Self Performance Key (A)			Support Provided Key (B)		Functional Level (C)	
0	Independent		0	No set up or physical help	I - Independent - safe alone	
1	Supervised		1	Set up only	S - Supervised, patient requires verbal cues or SBA for safety	
2	Limited Assist		2	One person physical assist	SBA/CGA	
3	Extensive Assist		3	Two + person assist	Min/Mod Assist	
4	Total Dependence		4	Did not occur	Max/U	
5	Did not occur				Activity did not occur during session	

(Min) Minimal Assist - Pt performs >75% (Mod) Moderate Assist - Pt performs 25-75% (Max) Maximal Assist - Pt performs < 25%

DAILY FUNCTIONAL STATUS

Date	Upper Body Dressing			Lower Body Dressing			Fxnal. Transfer (tub, toilet, bed)			Toileting			Personal hygiene & grooming			Eating			Bathing			Task Segmentation	Sit. Bal.	Stand Bal.
	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	UB	LB				
2/12/15																								
2/13/15	1	5		3	2	1	0	3	2	1	0	5		7	0	1	5				7		2	3
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Signature _____ Initials _____ Signature _____ Initials _____ Signature _____ Initials _____
Signature _____ Initials _____ Signature _____ Initials _____ Signature _____ Initials _____

White Memorial Medical Center Los Angeles, CA
DAILY TREATMENT RECORD AND STATUS REPORT
SNF DEPARTMENT



325

Page 1 of 2

9825039 (6/11)

WILLIAMS, WALTER LEE
M 086Y 11/03/1948 ATT 1024 ABBY, RAMADAS
ACCT: 514827
MR # 1302539 ADK 1024 ABBY, RAMADAS
ADMIT: 2/05/2014 REF



SNF P
5863

Dr. Ton, Physician
MDC LOS ANGELES
Metropolitan Detention Center
535 North Alameda St.
Los Angeles CA. 90012

310-555-6666

06:51:20 p.m. 02-13-2014 65562-112 2/8

**White Memorial
Medical Center**

**Adventist
Health**

For WHMC use only

WILLIAMS, WALTER LEE 3156-02
1 M 085Y 11/03/1948 ATT 1024 ABBOT, RAHADAS
2 Acc: 514927
3 MR # 130-25-39 AEM 1024 ABBOT, RAHADAS
4 ADM 1024 ABBOT, RAHADAS
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Inmate Status Report To: IMS

Attention: Ashley Telgland Fax#: fax - 817-842-9058 Phone#: phone - 817-842-2831

Case Manager: PAULITA T. BOYLES Fax#: (227) 265-5078 Phone#: (227) 268-5000

WHITE MEMORIAL MEDICAL CENTER

Patient Name: WILLIAMS, WALTER LEE Registered #: _____

Date(s) of review: 02/10 - 02/13/14

Hospital Unit Patient Resides in Today: _____ Med/Surg _____ ICU _____ CCU _____ Telemetry _____ SNF
_____ Swing Bed _____ Rehab _____ LTAC _____ Psych _____ Other: _____

Working Diagnoses/PMH: Left hip pinning / ORIF

Medications: Acyclovir 400mg po BID, Vit B 12 100 mcg po q AM, Benlate 2 tabs po q bedtime, Cardura 4 mg po q PM, Trazodone 1 tab po daily, Neurontin 600mg 2 caps po q PM, Kaletra 2 tabs po BID, Pancrelipase 1 CR cap po BID
Clinical, current progress: Pravachol 20mg po q PM, Regimip 4mg po q HS

Please see attached physical therapy reports

Action and Plan of Care:

Cont. dressing changes daily

Diagnostic Procedure(s) (Performed):

Diagnostic Procedure(s) (Pending):

Discharge Plan(s):

Return to HCC

Medications at discharge:

PRIVACY NOTICE

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Dr. Ton, Physician
MDC LOS ANGELES
Metropolitan Detention Center
535 North Alameda St.
Los Angeles CA. 90012

13232655038

09:24:53 a.m. 02-19-65562-112/1

**White Memorial
Medical Center**

**—Adventist
Health**

For WMHC use only

WILLIAMS, WALTER LEE 3156-02
M 065Y 11/03/1948 ATT 1024 ABOY, RAMADAS
1. ACCT: 614927
2. MR # 130-25-39 ADH 1024 ABOY, RAMADAS
3. ADMIT: 2/05/2014 REF
4. SNF F
COI 5863
WHITE MEMORIAL MEDICAL CENTER

Inmate Status Report To: IMS

Attention: Ashley Teigland Fax#: fax - 817-842-9058³⁹⁴⁻¹⁸⁶⁵ Phone#: phone - 817-842-2831⁴⁷⁷⁻⁰⁹⁰⁰
Case Manager: PAULITA T BOYLES Fax#: (323) 265-5038 Phone#: (323) 268-5000 x 2212

WHITE MEMORIAL MEDICAL CENTER

Patient Name: WILLIAM WALTER LEE Registered #: _____

Date(s) of review: 2/17 - 2/21/14

Hospital Unit Patient Resides in Today: ☐ Med/Surg ☐ ICU ☐ CCU ☐ Telemetry ☒ SNF
☐ Swing Bed ☐ Rehab ☐ LTAC ☐ Psych ☐ Other: _____

Working Diagnoses/PMH: S/P ORIF left hip pinning

Medications: Acyclovir 400 mg 7 tab po BID, Vit. B 12 100 mcg po q AM, Senokat
2 tab po q HS, Cordura 4 mg tabs po q PM, Tramadol 7 tab po daily,
Nuclofen 600 mg 2 cap po q PM, Kaletra 2 tab po BID, Zanyel 1 CR
Clinical, current progress: cap po BID meals, Pnuvachel 20 mg tab po q PM
Risperid 4 mg po (4 tabs) q HS

Action and Plan of Care:

Cont. dressing change daily

Cont. Physical therapy

Diagnostic Procedure(s) (Performed):

Diagnostic Procedure(s) (Pending):

Discharge Plan(s):

Return to MDC

Medications at discharge:

V 3/7/2014

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Dr. Toh, Physician
MDC LOS ANGELES
Metropolitan Detention Center
535 North Alameda St.
Los Angeles CA. 90012

13232655038

01:44:43 p.m. 02-28-2014 65562-112,1

**White Memorial
Medical Center**

**Adventist
Health**

For WMMC use only

WILLIAMS, WALTER LEE 3155-02
1. M 085Y 11/03/1948 ATT 1024 ABBOT, RAMADAS
ACCT: 514927
2. MR # 1302539 ADM 1024 ABBOT, RAMADAS
3. ADMIT: 2/05/2014 REP SNF F
4. 5803
cc

Inmate Status Report To: IMS

Attention: Ashley Teigland Fax#: fax - 817-842-9058 Phone#: phone - 817-842-2831
Case Manager: PAULITA BOYLES Fax#: (323) 265-5038 Phone#: (323) 268-5000

WHITE MEMORIAL MEDICAL CENTER

Patient Name: WILLIAMS, WALTER LEE Registered #: _____

Date(s) of review: 02/24 - 02/28/14

Hospital Unit Patient Resides in Today: Med/Surg ICU CCU Telemetry SNF
Swing Bed Rehab LTAC Psych Other: _____

Working Diagnoses/PMH: SIP ORIF t left hip Jimmy

Medications: Acyclovir 400 mg po BID, Vit B12 100 mcg po q AM, Seroquel 1600 mg po q HS, Cardura 4 mg po q PM, Tramadol 1 tab po daily, Neurontin 600 mg po q AM, Kaletra 1 CR cap. BID meals, Phosvel 20 mg po q PM, Regain 4 mg 1 tab q HS, PRN meds: Hydrocodone 2 tabs po q 4° pain, Morphine 30 mg 2 tabs po BID severe pain

Clinical, current progress: Patient progressing w/ OT/PT

Action and Plan of Care:

continue wound dressing daily → changed to steri-strips
continue OT/PT

Diagnostic Procedure(s) (Performed):

Diagnostic Procedure(s) (Pending):

Discharge Plan(s):

Back to MDC. Patient might need wheelchair upon d/c.
Medications at discharge:

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